

HOUSE BILL NO. 411

INTRODUCED BY C. HARRIS, CARNEY, DELL, EGGERS, GUTSCHE, HURDLE, JAYNE, KEANE,
LASLOVICH, LEE, LENHART, RASER, SCHMIDT, WOLERY, JACOBSON

A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE AUTHORITY OF THE MEDICAID FRAUD
CONTROL UNIT; ALLOWING THE UNIT TO INVESTIGATE AND PROSECUTE ALL CASES OF PATIENT
ABUSE, PATIENT NEGLECT, AND MISAPPROPRIATION OF PATIENT PROPERTY; PROVIDING FOR THE
REFERRAL OF COMPLAINTS TO APPROPRIATE FEDERAL, STATE, OR LOCAL AGENCIES; AMENDING
SECTION 53-6-157, MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 53-6-157, MCA, is amended to read:

"53-6-157. Powers and duties of medicaid fraud control unit. (1) The medicaid fraud control unit shall:

(a) investigate and prosecute under applicable criminal statutes fraud and abuse by applicants, recipients, providers, or any other persons ~~under the medical assistance program established under this chapter~~, including but not limited to cases referred by the department;

(b) review any complaint of patient abuse, patient neglect, and misappropriation of patient property ~~by providers or their employees or agents~~ and, when appropriate, shall investigate and initiate criminal proceedings or refer the complaint to another federal, state, or local agency for action;

(c) refer to the department for collection and, when appropriate, consideration and imposition of appropriate recipient restrictions or provider sanctions cases involving recipient or provider overpayments, fraud, abuse, inappropriate use of services, or other improper activities discovered by the unit in carrying out its activities;

(d) communicate and cooperate with and, subject to applicable confidentiality laws, provide information to other ~~state and~~ federal, state, and local agencies involved in the investigation and prosecution of health care fraud, abuse, and other improper activities related to the medicaid program;

(e) transmit to other state and federal agencies, in accordance with law reports of convictions, copies of judgments and sentences imposed and other information and documents for purposes of program

1 exclusions or other sanctions or penalties under medicaid, medicare, or other state or federal benefit or
2 assistance programs; and

3 (f) recommend to state agencies appropriate or necessary adoption or revision of statutes,
4 regulations, rules, policies, and procedures to prevent fraud, abuse, and other improper activities under
5 the medicaid program and to aid in the investigation and prosecution of fraud, abuse, and other improper
6 activities under the medicaid program.

7 (2) The medicaid fraud control unit may:

8 (a) initiate criminal prosecutions ~~related to the medicaid program~~ PURSUANT TO SUBSECTION (1) in any
9 court of competent jurisdiction in the state of Montana;

10 (b) upon written request, obtain information and records from applicants, recipients, and providers;

11 (c) exercise the authority granted to prosecutors with respect to criminal investigative subpoenas
12 under Title 46, chapter 4, part 3;

13 (d) subject to applicable federal confidentiality laws and regulations and for purposes related to
14 any investigation or prosecution ~~related to the medicaid program~~ PURSUANT TO SUBSECTION (1), obtain from
15 the department, county welfare and human services offices, and other local, county, or state government
16 departments or agencies records and other information, including but not limited to applicant and recipient
17 applications, provider enrollment forms, claims and reports, individual or entity tax returns, or other
18 information provided to or in the possession of the department of revenue or the state auditor;

19 (e) refer appropriate cases to other ~~state or federal~~, state, or local agencies for investigation,
20 prosecution, or imposition of penalties, restrictions, or sanctions;

21 (f) enter into agreements with the department and other ~~state and federal~~, state, and local
22 agencies in furtherance of the unit's mission; and

23 (g) do all things necessary to comply with 42 U.S.C. 1396a(a)(61) and 42 U.S.C. 1396b(q) and
24 any implementing federal regulations and policies that require the state to operate a medicaid fraud control
25 unit."

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27 NEW SECTION. **Section 2. Effective date.** [This act] is effective on passage and approval.

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